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CONFIRMATION NO. 6087

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| SERIAL NUMBER 10/502,347 | FILING OR 371(c) DATE 07/14/2005 RULE | CLASS 607 | GROUP ART UNIT 3762 | ATTORNEY DOCKET NO. 12637/58 |
| APPLICANTS Ali Rezai, Bratenhal, OH; Thomas MacMartin Harman II, Palo Alto, CA; Ashwini Sharan, Mt. Laurel, NJ; | | | | |
| ** CONTINUING DATA ***** This application is a 371 of PCT/US03/03003 02/03/2003 which claims benefit of 60/353,700 02/01/2002 * (*)Data provided by applicant is not consistent with PTO records. | | | | |
| ** FOREIGN APPLICATIONS ***** <div style="text-align: center;">** SMALL ENTITY **</div> | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____ | | STATE OR COUNTRY OH | SHEETS DRAWING 10 | TOTAL CLAIMS 31 |
| | | | | INDEPENDENT CLAIMS 6 |
| ADDRESS 23838 | | | | |
| TITLE Delivery device for stimulating the sympathetic nerve chain | | | | |
| FILING FEE RECEIVED 678 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |